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PABST PATENT GROUP



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TELEFAX

Date: May 31, 2005

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Our Docket No. MIT 8299

Client/Matter No. 701350/31

Your Docket No.

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MESSAGE:

Amendment After Appeal

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Monty Krieger

Serial No.: 09/148,012

Art Unit: 1647

Filed: September 4, 1998

Examiner: Robert S. Landsman

For: "SR-BI ANTAGONIST AND USE THEREOF AS CONTRACEPTIVES AND
IN THE TREATMENT OF STEROIDAL OVERPRODUCTION"

PTO/SB/21 Transmittal Form; PTO/SB/21 Fee Transmittal, Amendment and
Response

(45057363.1)

10 of 20

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/148,012
	Filing Date	September 4, 1998
	First Named Inventor	Monty Krieger
	Art Unit	1647
	Examiner Name	Robert Landsman
Total Number of Pages in This Submission	Attorney Docket Number	MIT 8299

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <i>After Appeal</i> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Pabst Patent Group LLP	
Signature	<i>[Signature]</i>	
Printed name	Patrea L. Pabst	
Date	May 31, 2005	Reg. No. 31,284

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature	<i>[Signature]</i>	
Typed or printed name	Chandra Russell	Date May 31, 2005

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PTO/SB/17 (12-04)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4010).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 0.00**Complete if Known**

Application Number	09/148,012
Filing Date	September 4, 1998
First Named Inventor	Monty Krieger
Examiner Name	Robert Landsman
Art Unit	1647
Attorney Docket No.	MIT 8299

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-3129 Deposit Account Name: Pabst Patent Group LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

HP = highest number of total claims paid for, if greater than 20 **Fee (\$)** **Fee Paid (\$)**

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

Signature	Registration No. 31,284 (Attorney/Agent)	Telephone (404) 879-2151
Name (Print/Type) Patrea L. Pabst		Date May 31, 2005

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MIT 8299 701350/31

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Monty Krieger

Serial No.: 09/148,012

Art Unit: 1647

Appeal NO: 2004-1823

Filed: September 4, 1998

Examiner: Robert S. Landsman

For: *SR-BI ANTAGONIST AND USE THEREOF AS CONTRACEPTIVES AND IN
THE TREATMENT OF STEROIDAL OVERPRODUCTION*Assistant Commissioner for Patents
Washington, D.C. 20231

AMENDMENT

Sir:

Responsive to the Decision in the Appeal mailed March 29, 2005, please amend the application as follows. It is believed that no fee is required with this submission. However, should an additional fee be required, the Commissioner is hereby authorized to charge the fee to Deposit Account No. 50-1868.